# **APPLICATION DATA SHEET**

## **Application Information**

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	BRAKE PRESSURE CONTROL DEVICE IN BRAKE SYSTEM
Attorney Docket Number::	033697-013
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	6
Small Entity?::	No

Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Shuichi
Middle Name::	
Family Name::	YONEMURA
Name Suffix::	
City of Residence::	Anjo-shi
State or Province of Residence::	Aichi-ken
Country of Residence::	Japan
Street of Mailing Address::	c/o ADVICS CO., LTD., 2-1, Asahi-machi
City of Mailing Address::	Kariya-shi
State or Province of Mailing Address::	Aichi-ken

Japan

Postal or Zip Code of Mailing

Address::

**Applicant Authority Type::** 

Inventor

Primary Citizenship Country::

Japan

Status::

**Full Capacity** 

Given Name::

Yoshio

Middle Name::

Family Name::

KATAYAMA

Name Suffix::

City of Residence::

Nagoya-shi

State or Province of Residence::

Aichi-ken

Country of Residence::

Japan

Street of Mailing Address::

c/o ADVICS CO., LTD., 2-1, Asahi-machi

City of Mailing Address::

Kariya-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing

Address::

# **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number::

(703) 836-6620

Fax Number:

(703) 836-2021

#### **Representative Information**

Representative Customer Number::

21839

### **Domestic Priority Information**

Application::

Continuity Type::

Parent Application:: Parent Filing

Date::

### **Foreign Priority Information**

Country::

**Application Number::** 

Filing Date::

**Priority** Claimed::

Japan

2003-075379

03/19/03

Yes

### **Assignee Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::